## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

## Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000052004 (5)

## A-1 AIR CONDITIONING & HEATING OF SARASOTA, INC.

Principal Place of Business Mailing Address 1812 RACIMO DRIVE 1812 RACIMO DRIVE **SARASOTA FL 34240-9423 SARASOTA FL 34240-9423** 3a. Date of Last Report 3. Date Incorporated or Qualified 06/30/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0593992 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Zio Country Country Zip This corporation has liability for intangible tax under s. 199.032, ZYes ☐ No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name MUNSELL, JOHN K 1812 RACIMO DRIVE 62 Street Address (P.O. Box Number is Not Acceptable) **SARASOTA FL 34240-9423** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. Change Addition THUE ☐ DELETE 1.1 TITLE MUNSELL, JOHN K 1.2 NAME NAMI 1812 RACIMO DRIVE 1.3 STREET ADORESS STREET ADDRESS SARASOTA FL 34240-9423 CITY-SI-7IP 1.4 CITY-ST-ZIP DELETE Change ■ Addition 2.1 TITLE 21116 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST- ZIP CITY - \$1 - 7IP DELETE 3.1 TITLE Change Addition THLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY+ST-2IP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIF DELETE Change Addition 5.1 TITLE HILE NAME 5.2 NAME **5 3 STREET ADDRESS** STREET ADDRESS 5.4 CITY+ST-ZIP CITY ST-ZF DELETE Change Addition 61 TITLE THEF 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

appears in Block 12 or Plock 13 if changed, or on an attachment with an address.

SIGNATURE:

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name